

Welcome to

Children With Autism Waiver

Webinar for Case Managers



PRESENTED BY:
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DATE:
November 2013

AUDIO OPTIONS:
Use Telephone

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Access Code: 982280

Our Mission:

Improving health care access
and outcomes for the **people**
we serve while demonstrating sound
stewardship of financial **resources**



Senate Bill 12-159



- Background issues
- What it does
- Who it effects
- When changes take effect

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Legislation was passed in 2012

Background issues – the waiver was under utilized because it served a small population and the time it takes for a client on the waitlist, they age out of the waiver before they can receive services

Stakeholders came together to draft this legislation to require the Department to do the following:

- Department must prioritize waitlist based on imminent need
- Department must review funds annually to determine if adding waiver slots is possible
- Requires providers to perform a standardized, norm-referenced assessment
- Requires an outside contractor develop evaluation of program to see effectiveness of the waiver
- Changes take effect January 1, 2013

Standardized Norm-Referenced Assessment

→ Most current version of an assessment tool that **measures a child's adaptive functioning**, including but not limited to:

- self-help skills
- expressive and receptive communication
- adaptive and maladaptive behaviors



Needed to find a way to assess clients needs consistently

A workgroup of Department staff, advocates, parents, Case Manager supervisors and providers came together to discuss the requirements of the legislation, brainstorm ideas on how to prioritize the waitlist, and how to deal with clients who are already on the waitlist.

Definition of Standardized Norm-Referenced Assessment

Standardized Norm-Referenced Assessment

→ A few examples of appropriate assessment tools:

- Vineland Adaptive Behavior Scales, Second Edition (Vineland-II)
- Scales of Independent Behavior, Revised (SIB-R)
- Adaptive Behavior Assessment System, Second Edition (ABAS-II)



A Standardized Norm-Referenced Assessment can be provided by anyone who has the credentials to provide the assessment

These are 3 examples of the most common assessment tools out there. These three are mentioned in the rule as suggested assessments.

This specific variety of assessment tools was picked because:

- They are comparable to each other – the scores can be compared across the board
- Gives Providers options to provide the assessment they currently use or like
- Gives families more options of providers

Prioritizing CWA Waitlist

Begins November 1, 2013

Waitlist #	Client Name	Assessed Need
1	Client 123	Low
2	Client 456	Medium
3	Client 789	High
4	Client 147	Medium
5	Client 258	Low
6	Client 369	High
7	Client 014	High

Order Submitted	Client Name	Assessment Score
3	Client 789	4
6	Client 369	19
7	Client 014	33
2	Client 456	47
4	Client 147	62
1	Client 123	85
5	Client 258	96

Past – first come, first served

Future – prioritized waitlist based on standardized assessment score



Current clients on the waitlist prior to November 1, 2013 will be grandfathered in in the order they already are in.

The prioritized waitlist will only apply to clients entering the waitlist after November 1, 2013

Current waitlist places clients on the waiver in a first come, first served basis

The prioritized waitlist will place clients based on need according to their standardized norm-referenced assessment score.

The lowest composite score = highest need

The Assessment

- To get on the waitlist, families must have their child assessed
 - Family can use a previously conducted assessment, but it must be standardized norm-referenced, AND less than 1 year old
- Once on waitlist, the child will not have to be re-assessed again until enrollment in the waiver



Families must have their child assessed or have a recent assessment that is standardized norm-referenced and less than 1 year old in order to be placed on the waitlist.

Once on the waitlist, the child will not have to be re-assessed again until enrollment in the waiver.

It's important to note that children on the CWA waiver waitlist prior to November 1, 2013 will be grandfathered in and will maintain their current place on the waitlist. Only children added to the waitlist after November 1, 2013 will be prioritized by assessment score.

The Assessment

- Families must pay for the initial assessment for placement on waitlist
 - Possible funding for current Medicaid families
- Once enrolled in waiver, assessments will be covered by waiver funds



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The legislation did not appropriate any funds to help families pay for the assessment. Families will have to pay for the first assessment to get the client placed on the waitlist.

The Department is exploring options to provide funding for families currently on Medicaid. Additional resources may be available and will be posted on Advocates website.

Once the client is placed on the waiver, the assessments will be covered by waiver funds.

The Assessment

→ Once on the waitlist, if a family feels the child's condition has changed:

- Family can choose to have child re-assessed at own cost
- Lowest score determines waitlist position



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Once on the waitlist, the family can choose to have their child re-assessed at any time, however, this assessment will be at their own cost.

The family/provider can submit the new score to the Case Manager to see if it changes their position on the waitlist.

The lowest score determines the waitlist position.

The Assessment

- To **enroll** in the waiver, client must have an assessment **less than 30 days old** to begin receiving services



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Assessments can be up to a year old in order to get on the waitlist

To enroll in the waiver, clients must have a new assessment that has occurred less than 30 days prior to beginning services

The Assessment

- Once client is on the waiver, the assessment **does not** determine eligibility for the program
 - ULTC 100.2 drives eligibility in the program
- Standardized Norm-Referenced assessment **can be used** to develop treatment plans or may effect the service plan

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The standardized norm-referenced assessment does not determine eligibility for the program – the ULTC 100.2 is still the driving assessment for eligibility

It can be used for developing treatment plans or it may effect the development of the service plan

Questions

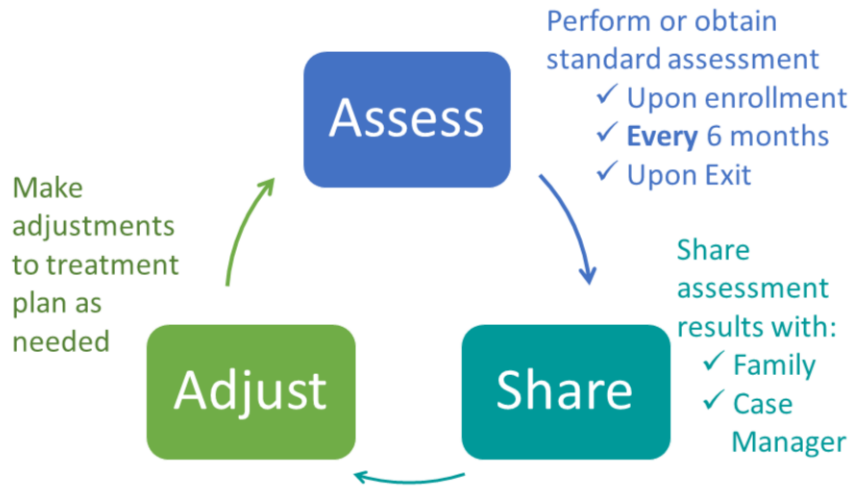


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Questions about the assessment before we get into the process?

Provider Assessment Process



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This is the process the Provider is responsible for

Case Manager Requirements



→ Verify assessment validity

1. Obtain assessment info
2. Verify if it is standardized norm-referenced
3. If so, begin waitlist procedures

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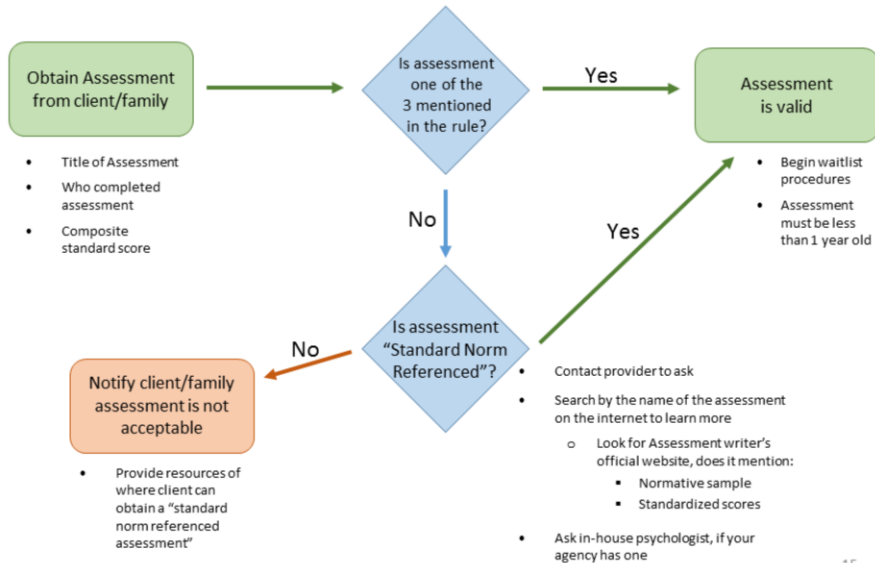
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Case Managers are responsible for verifying the assessment'

These are the basic steps, we'll get more in-depth on next slide

Verifying Assessments – Decision Chart



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This is a decision chart for verifying assessments. Also provided as stand alone HANDOUT

Case Manager Requirements



- Add services to Service Plan
- Two new services in BUS
 - Initial / ongoing evaluation
 - Post service evaluation

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These new services will have to be added to the service plan

In the BUS the Assessment is called the initial/ongoing evaluation and Post Service evaluation

The Department is working to update the BUS with these two new services

PAR Requirements

- Create or update PARs
 - Paper PARs only – **no CCMS** for this process
- Two new services also added to PAR
 - Initial / ongoing evaluation
 - Post service evaluation

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The same services are also used on the PAR

Can only use paper PAR for this process – No CCMS

Getting a Client on the Waitlist

- Receive referral
- Verify assessment score
- Conduct visit to determine eligibility
 - ULTC 100.2 Assessment
 - Client must have diagnosis of Autism
- Send enrollment form, PMIP and score to CWA Waiver administrator
- Receive waitlist number
- Inform family

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** Animation on this slide – click to activate each step (6 steps)

Receive referral

Verify assessment score

Conduct visit to determine eligibility

ULTC 100.2 Assessment

Client must have diagnosis of Autism

Send enrollment form, PMIP and
score to program administrator

Receive waitlist number

Inform family

No Medicaid application is needed until the client will be placed on the waiver, unless the client is already on Medicaid.

Resources

→ Volume 8 Rules – 8.519

- www.colorado.gov/hcpf
 - Quick Links – Program Rules and Regulations

→ PAR form

- www.colorado.gov/hcpf
 - Providers > Provider Services > Forms

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You can find information on our website to find the text of the rules and the PAR Form

Questions



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Questions about the waiver changes or process?

Next we're going to cover a few basics and reminders....

CWA Waiver Reminders

→ Steps for Enrolling a Child

- Receive letter from program administrator with child's name
- Contact family and confirm they would like to pursue waiver
- Confirm Medicaid and disability application (if applicable) have been submitted

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Steps for Enrolling a Child

Receive letter from program administrator with child's name

Contact family and confirm they would like to pursue waiver

- Give family 30 days to make decision
- 3 attempts with no reply = send 803

Confirm Medicaid and disability application (if applicable) have been submitted

CWA Waiver Reminders

→ Enrolling a Child

- Conduct functional assessment with client and family
 - Must be completed within 5 working days of receiving notice from waiver administrator
 - Please document in the BUS when this timeframe is not met, and why

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Enrolling a Child

Conduct functional assessment within 5 days of receiving notice from waiver administrator

If this timeframe is not met, document that in the log notes on the BUS. Use log notes to track every attempt to contact – this is the official record for the client

CWA Waiver Reminders

→ Enrolling a Child

- If child meets program criteria, send Initial Enrollment form and PMIP to program administrator
- Receive signed enrollment form from program administrator and send to county for final processing and system coding

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Enrolling a child continued

CWA Waiver Reminders

→ Please remember these important timeframes:

- Child's start date must be the **later** of the three: the 100.2 assessment date, the date on the PMIP, OR financial eligibility date
- Service plan must be finalized no later than **15 days** after the staffing date
- PAR must be completed no later than **30 days** after the start date

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Timeframes

CWA Monthly Billing Report

HOME AND COMMUNITY BASED SERVICES FOR CHILDREN WITH AUTISM CCB MONTHLY CLIENT AND ASSESSMENT COUNT			
CCB NAME:		MONTH/YEAR OF SERVICES:	
		SUBMISSION DATE:	
SERVICE AREA	Number of Clients	Rate per Month	Total
HCBS-CWA CASE MANAGEMENT	0	\$110.00	\$0.00
ASSESSMENTS			
HCBS-CWA INITIAL APPROVAL	0	\$75.00	\$0.00
HCBS-CWA INITIAL DENIAL	0	\$75.00	\$0.00
HCBS-CWA CONTINUED STAY REVIEW	0	\$75.00	\$0.00
TOTAL MONTHLY PAYMENT:	\$0.00		
Clients Assessed (current Month):		Clients newly Enrolled:	

To get this
electronic form
contact
Amy Scangarella

Monthly Billing
Reports due to Amy
by the **10th of the
month** for the
previous month's
billing

Example: Billing Report for August 2013,
invoice must be submitted by September 10th, 2013

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**** Animation on this slide – click to activate who to contact to get this form, when reports are due, and report due date example**

CWA Waiver Reminders

→ Quarterly Reports

- Complaint Report
- Critical Incident Report
- Training Report
- Administrative Tool

→ Reports due 30 days after end of each quarter

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CWA Waiver Reminders

→ Quarterly Reports Due Dates

- Quarter 1: January – March
 - Due April 30
- Quarter 2: April – June
 - Due July 31
- Quarter 3: July – September
 - Due October 31
- Quarter 4: October – December
 - Due January 31

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CWA Waiver Reminders

→ HIPAA

- It is **everyone's responsibility** to protect client information
 - Name, address, phone, email address, Medicaid ID, SSN, Pharmacy ID, etc.
- **Encrypt ALL emails** containing client information before sending
- Don't put any client information on **FAX cover pages**

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HIPAA Reminders

It is everyone's responsibility to protect client information

Includes any personal identifying information, here are a few examples

Any emails containing this type of client information **MUST** be sent encrypted

FAX cover pages are intended to keep the contents of the fax confidential – do not include client information as part of the FAX cover page - this violates confidentiality

Questions



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Contacts

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